## PERMISSION FOR USE OF THE TOWN PROPERTY

(GREEN AREA LOCATED ON MAIN ST. & CEDAR ST. AKA Tyler's Park)
(FILE WITH THE SELECTMAN'S OFFICE)

NAME OF ORGANIZATION	
PURPOSE OF ORGANIZATION	
PROOF OF NON-PROFIT(IF ANY)	
PERSON IN CHARGE OF EVENT	
ADDRESS	
TELEPHONE NUMBERS Work:  Home:	
ACTIVITY TO BE HELD	
DATE OF EVENT TIME OF	EVENT
ESTIMATED NUMBER OF PEOPLE EXPECTED TO PARTIC	IPATE
WILL FOOD BE AVAILABLE FOR SALE? YES	NO
If Yes, East Shore Health Department must be contacted for a lice	nse.
The undersigned agrees to the Rules and Regulations governing th	e Town of Branford.
Signed	Date
For Office Use Only	
Approved:	Date
Board of Selectman(authorized signature) cc: Chief Gill	